Enfield Recreation Department

YOUTH BASKETBALL

2016-2017

"Fostering Positive Youth Development One Athlete At A Time"



Registration Deadlines:

In office registration ends Friday, October 7th at 5:00 PM Online registration ends, Monday, October 10th at 11:59 PM

This deadline is for <u>ALL</u> divisions <u>including</u> High School.

Enfield Recreation Department 19 North Main Street Enfield, CT 06082

Phone: 860.253.6420

www.enfield-ct.gov/recreation

Enfield Recreation Department Youth Basketball Registration Form

	•				
Player's Name:	Sex:	Age://			
Street Address:		Home Phone: ()			
School:	_ Grade:	Height:Feet/incl	nes		
Are you playing on any other teams?	Number of yea	ars playing organized basketball:			
SHIRT SIZE: Youth 10-12 Youth 14-16 (Please Circle Size - note that youth sizes run small)	Adult Small Adult Me	dium Adult Large Adult XL Adult	XXL		
Emergency Contact:	Relationship:	Phone:			
MOTHER'S NAME:	FATHER'	S NAME:			
Best Contact Number:	Best Con	Best Contact Number:			
Email Address:		(For email confirmation of registration	on)		
ACTIVITY NUMBER:		(See program information)			
Are there any medical conditions or speci			_ No		
PRACTION PRACTION PRACTICE TIME OR WHAT TEAM YOUR		ver, we CANNOT GUARANTEE YOUR			
List any conflicts, days & times your child C	ANNOT practice:				
PARENTS/GUARDIANS:					
YES, I will be a head coach: Name		Phone:			
YES, I will be an assistant: Name		Phone:			
	aplete the coaching application form before the registration de	n and return it with the participant registration adline.			
In consideration for participating in the above-referenced prelease the Town of Enfield, its agents, officers and empliabilities, costs, expenses and or judgments, including attreferenced program/activity or any illness or injury resulting	oyees, whether paid or voluntar torney's fees and court costs, w	ry, from and against any and all claims, suits, actions, thich may arise from my or my child's participation in	damages		
I hereby represent that I understand and am familiar wit referenced program/activity. I further represent that I am, or other health condition that would affect my or my child's	th the nature and type of activition my child is, in good physical a	ties in which I or my child will participate as part of and mental health condition and that I am unaware of a			
Photo Release: The Recreation Department reserves the rare for Recreation use only and may be used in future cata			ese photo		
I acknowledge that I will be solely responsible for the furnis	hing of all cofequends and appro	prieto equipment for protection against injury			

I have read this document and understand and agree to its terms and conditions.

EYBL REGISTRATION INFORMATION

The Enfield Recreation Department will accept Online, Walk-in, and Mail-in registrations. All registrations must be received by the deadline. Those received after the deadline will be put on a waiting list. *Please note this program is for Enfield Residents only.*

Instructions for Online Registration: Online registration will begin on September 23, 2016 at 12:01 AM and end on October 10, 2016 at 11:59 PM. Log onto the Town's website at www.enfield-ct.gov/recreation and click on the blue "Online Program Registration" button. Online registration is on a first come, first serve basis and accepts standard credit cards only (debit cards are not accepted). Visit the website anytime to create an online account. Please print a receipt when registering online. No further notification will be sent. Please note: no technical assistance will be available for online registration after 5 PM on October 7th. Please register early to ensure a spot in the program.

Instructions for Mail-In Registration: Complete registration form. Include a check or money order payable to the "Enfield Recreation Department". Mail-in registrations received without payment will be returned. Include an email address for a paperless confirmation or self-addressed stamped envelope so we may confirm your registration by mail. If you have not received your confirmation within 10 business days of the registration start date, please contact the Recreation Department. Include a photocopy of proof of residency. Acceptable forms of ID are: valid driver's license, tax bill, utility bill, renter's/homeowner's agreement. **NOTE:** A check is not considered proof of residency. Mail the registration form, check or money order, self-addressed stamped envelope and proof of residency to the Enfield Recreation Department (the mailing address in on the cover of this brochure). **All mail-in registrations must be received by the Recreation office by October 7th deadline. The Recreation Department is not responsible for lost or untimely mail delivery.**

Instructions for <u>Walk-In Registration</u>: The Recreation Department will accept walk-in registrations Monday through Friday 9:00 AM - 5:00 PM beginning on **September 23, 2016**. Walk-in registration must be received by the deadline of **October 7, 2016** by 5:00 PM. Cash or check only.

Proof of residency and complete payment are required at the time of registration. The parent or legal guardian must register their child. We will **not** accept notes allowing friends, grandparents, etc., to register a child. Registration will **not** be accepted before the initial registration date and phone registrations will **not** be accepted. All fees must be paid at the time of registration. Checks are made payable to the "**Enfield Recreation Department**". A parent's or legal guardian's signature is required for all children's programs.

We Need Coaches!

Without volunteer coaches our program wouldn't happen. WE NEED YOU! If you are interested in being a Head Coach or Assistant Coach fill out the coaches application included in this packet and return it to the Recreation Department no later than **October 7, 2016**. All coaches must be picked before the draft date. It is **Mandatory** that all coaches attend the coaches meeting and the draft. The coaches meeting will provide coaches with all the information they need to know about the program and what happens at the draft.

IMPORTANT DATES (applicants must be able to attend all dates below to be eligible to coach)

ALL COACHES Complete the Coaches Application and return it to the Recreation Office before 5:00 PM on October 7, 2016.

ALL COACHES Attend mandatory EYBL coaches meeting on October 25, 2016 at the Angelo Lamagna Activity Center.

Please note: if you are selected to coach you will be notified prior to the meeting.

ALL COACHES Attend division draft night to assist in team selection (information & dates will be handed out at the coaches

meeting).

WHAT IS THE TIME COMMITMENT? Teams in grades 3 - 12 have one practice and one game per week. Practices are held Monday - Friday at local gyms in town. Games are held on Friday evenings, Saturdays or Sundays during the day. For more information on coaching with the EYBL program contact the Recreation Supervisor or Assistant Recreation Supervisor at 860-253-6420.

Please note that this program is not possible without volunteer coaches. We need 1 coach for every 10 players who register.



Enfield Travel Basketball League Please note this program <u>IS NOT</u> run by the Recreation Department.

Enfield Travel Basketball Association provides Enfield residents in grades 5-8 with an opportunity to play competitive basketball against teams from surrounding towns. The teams are comprised of 5-6th grade boys, 5-6th grade girls, 7th grade boys, 8th grade boys, and 7-8th grade girls. The season consists of 2 games per week and are on Friday, Saturday or Sunday. The Season runs December - February. For more information, including tryout dates please contact etba@cox.net.

Enfield Youth Basketball Information

Please turn this page over for additional program information.

Grades 1 & 2 Instructional Program

An instructional program for Enfield youth in grades 1 & 2 will start in January. Information will be sent home through the elementary schools later in the fall.

Grades 3 - 12

This program meets for one weeknight practice (Monday-Friday) and for a 1 hour game on Friday evenings or on Saturdays or Sundays during the day. The goal of the program is to foster positive youth development, sportsmanship and to promote physical fitness. Participants are placed on teams through a draft system. **PLAYER EVALUATIONS WILL NOT BE HELD**. All participants will receive a team shirt to wear for games. **FEE: \$90.00**

Coaches will contact players by November 14th. Practices will begin the week of December 5th.

Boys Grade 3 & 4 Activity #: 3603.0206.104

Boys Grade 5 & 6 Activity #: 3603.0206.105

Boys Grade 7 & 8 Activity #: 3603.0206.106 Girls Grade 3 & 4

Activity #: 3603.0206.108

Girls Grade 5 & 6 Activity #: 3603.0206.109

Girls Grade 7 - 9 Activity #: 3603.0206.110

Boys Grade 9 - 12 Activity #: 3603.0206.107

Youth who intend to try out for the Middle School, High School or Travel basketball team should still register for EYBL by the deadline.

The Recreation Department will refund those who make a team and wish to withdraw minus a 10 percent processing fee.

We CANNOT guarantee a spot for those who do not register by the deadline.

REMINDER: REGISTRATION DEADLINE FOR ALL DIVISIONS IS FRIDAY, OCTOBER 7TH.

Program Policies

- All participants must be registered by October 7, 2016. Players registered after this date will be placed on a waiting list and placed on a team only if roster size allows. Team placement is not guaranteed after the deadline.
- We will make every effort to ensure the success of each division in the league. A minimum of 32 participants in a division is required to run that division. If a division does not get the minimum required 32 participants by the coaches meeting it will be cancelled.
- Participants must register for and play in the division that corresponds with the grade they are currently in. Players are not allowed to play up or down a division based on ability, age or height. Player must be <u>currently</u> enrolled in that grade to participate.
- All participants regardless of school enrollment status must be 19 years of age or younger as of March, 31, 2017.
- Participants may select one and only one night they cannot practice. We will make every effort to avoid that night when you are placed on a team. If this night changes you must alert the office before November 1, 2016 at 5 PM.
- Players selected off the wait list will not have the opportunity to select one night they cannot practice. Players will be assigned to teams as they have availability.
- Team placement is final following the team selection. We <u>do not</u> honor requests for teammates, coaches, practice times, or facilities.
- Siblings in the same division will be placed together unless otherwise requested.
- The EYBL program is for **ENFIELD YOUTH ONLY**. Proof of residency is required at time of registration.
- The EYBL program cannot run without volunteer coaches. We need one head coach for every ten players who register for the program. Divisions which do not have enough coaches by the draft date will result in some players being drafted to teams without a coach. Families with players on these teams will be contacted to help with practices. We will not know how many coaches we need until registration closes.

ENFIELD YOUTH BASKETBALL LEAGUE - COACHING APPLICATION COACHES INFORMATION

NAME:			TOD <i>F</i>	AY'S DATE:	
ADDRESS:					
No.	Street		City/Town		State/Zip Code
PHONE: (Home)_		(Work)		(Cell)	
E-MAIL:			DATE	OF BIRTH:	
POSITION APPLY	/ING FOR (check all that apply): _	Head Coach	Assistant Coach	Co-Coach	with another parent
FULL NAME OF C	CHILD I WISH TO COACH		GENDER		GRADE
1					
2					
practices. Older g	Monday - Friday, between 5:15 F grades are assigned 7:45 PM prace nt prior to the draft night.	ctices. Please note a	nny days you are not availab	ole to coach. Pr	actices will be assigned
IMPORTANT DA	TES (applicants must be able to a	nttend all dates below	v to be eligible to coach)		
ALL COACHES	Complete the Coaches Applica	ation and return it to	the Recreation Office before	e 5:00 PM on O	ctober 7, 2016.
ALL COACHES	Attend mandatory EYBL coach are selected to coach you will I		· · · · · · · · · · · · · · · · · · ·	magna Activity (Center. Please note: if you
ALL COACHES	Attend division draft night to as	sist in team selection	n (information & dates will be	e handed out at	the coaches meeting).
		COACHING	HISTORY		
COACHING CER	TIFICATION: YES NO		CPR/FIRST AID: YES	NO EXP. I	DATE:
OTHER CERTIFIC	CATIONS:				
COACHING EXPE	ERIENCE:				
COACHING PHIL	OSOPHY:				
PLAYING EXPER	IENCE:				
LIST 2 PERSONA	AL REFERENCES AND PHONE N	NUMBERS:			
NAME:			PHONE:		
NAME:			PHONE:		

COACHING APPLICATION - PAGE TWO

For the following question, exclude any convictions or arrests which have been erased from your record pursuant to Connecticut General Statues§\$46b-146, 54-76o or 54-142a. Erased records include the following: (a) a finding of delinquency or that a child was a member of a family with service needs; (b) a sentence as a youthful offender; (c) a criminal charge that was dismissed or "nolled"; (d) a criminal charge for which the person was found not guilty; and (e) a conviction for which the person received an absolute pardon. For erased convictions or arrests you are considered to have been arrested and may swear so under oath.

Have you ever been convicted of a law violation other than a minor traffic offense:	Yes	No	
If yes, please explain:			
For purposes of this application, reckless driving, evading responsibility, engaging in intoxicated are not considered minor traffic offenses.	n pursuit, d	Iriving while impaired and	d driving while
Have you ever been fired or asked to resign from a job? Yes No			
If yes, please explain:			
Are you a United States citizen or are you authorized to work in the United States?	Yes	No	
CERTIFICATION AND RELE	ASE		
I certify that there are no misrepresentations, omissions or falsifications in the for responses given are true, complete and accurate to the best of my knowledge misrepresentation, omission or falsification may be grounds for rejection of my appli	ge and ar	e made in good faith.	I understand that any
I authorize the Town of Enfield to contact all of the educational institutions, employed the Town may deem necessary to contact to obtain information related to my application above to provide information to the Town of Enfield and I hereby release the Tow such information from any and all liability and/or damages arising out of the release	cation for n of Enfie	employment. I authorize Id and all such persons	e all such contacts noted
I understand that upon an offer of employment, I may be requested to successfully screening test, consisting of blood and/or urinalysis test(s) to detect the presence barbiturates, heroin, cocaine, marijuana) and that any positive test(s) will be collaboratory conducting such test(s) to release the results of such test(s) to the Tow such results. I understand that the results of such test(s), if positive, may result Enfield. I release the Town of Enfield, employees of the Town of Enfield, elected or laboratory conducting such test(s), its employees and representatives from any and test(s).	of illegal confirmed by n of Enfie in my dis	rugs and/or alcohol, (ind y two (2) alternative m ld and I understand that equalification from emplo d officials of the Town of	cluding but not limited to, ethods. I authorize the I may request a copy of byment with the Town of Enfield and I release the
APPLICANT'S NAME:	SS#**		_
APPLICANT'S SIGNATURE:	DATE:		
THE TOWN OF ENFIELD IS AN AFFIRMATIVE ACTION/EQU	JAL OPPO	DRTUNITY EMPLOYER	-M/F

FOR INTERNAL USE ONLY

** Mandatory to run the required background check.